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INF	ORMATION	DISCLOSU	RE	are required to respond to a collection of Information unless it displays a valid OMB cor  Complete If Known  Application Number To Be Assigned  Fung Date Herewith  First Named Inventor Akihiro IMA  Art Unit To Be Assigned  Examiner Name To Be Assigned  Altorney Docket Number 0666.1760002/TGD/EDH	Herewith
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Examiner Initials*	Cite No.1	Document Number	Publication Date	Name of Patentee or Applicant of	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
	No.	Number-Kind Code <sup>2 (If Known)</sup>	MM-DD-YYYY	Cited Document		
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100	BA1	JP 63-247172	10/1900 10/1988			
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